"Rule Out" May Be a "Cop Out"

Two trends in medicine and especially in the field of family practice have converged in such a way as to challenge the validity of a time-honored diagnostic stance, namely: "rule out." These two trends are the widespread adoption of the problem-oriented record and the general recognition that a major portion of physician-patient encounters do not fit the traditional medical model.

Following the traditional model, one "ruled out" all reasonable and some not so reasonable organic diagnoses by a series of diagnostic, historical, physical diagnostic and laboratory procedures; a plan which was often quite time consuming, frustrating and expensive. Once this diagnostic game was exhausted one then announced to the patient that the problem must be entirely emotional since there were no valid diagnoses uncovered by the diagnostic exercise. Needless to say this announcement was not always readily accepted by the patient and all too frequently this same diagnostic guessing game was renewed with another set of physicians.

The problem-oriented system demands that we look at the total situation in a holistic manner from the very onset. Thus psychological factors, such as anxiety and depression; behavioral factors, such as problems of living manifest as symptoms; and psychosocial factors, such as loss, deprivation and loneliness, are recognized in their own right and by their own valid diagnostic criteria without waiting for the exhausting process of "rule out."

This approach in no way diminishes the importance and significance of an accurate history. To the contrary it enhances the value of the history by giving it a broader base.

This approach in no way maligns the value of an accurate physical examination and the usefulness of appropriate laboratory tests.

This approach simply reassembles the priorities and insures that regardless of what physical, chemical or structural deviations are discovered, they are all viewed in the context of the patient's lifestyle, his family relationships, his position and responsibilities in society and the stresses and emotions which go with his societal role.

J. BLAIR PACE, MD

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Xeromammography, an Improved Method of Detecting Breast Cancer

EARLY DIAGNOSIS of breast carcinoma seems to offer the best chance of survival. Xeroradiography, an improved radiologic technique, has proven helpful in the diagnosis of breast lesions, particularly carcinoma. Some carcinomas, which were not diagnosed from conventional mammograms, were more clearly evident on xeromammograms. Carcinomas in dense fibrous breasts have been more readily identifiable. Easy readability has added to the benefit of this method. A recent study of 250 patients revealed 13 clinically occult carcinomas. Self-examination by the patient and examination by the physician who has a high index of suspicion is essential for early diagnosis. Xeromammography appears to be a superior method (compared to mammography) for the diagnosis of carcinoma of the breast. It offers the practicing physician another aid in breast cancer diagnosis.

BENSON McGANN, MD

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Soap Photodermatitis

THE INGENIOUS CHEMISTS of industry have created a large variety of chemical products which have a characteristic of reacting with the outer layers of skin to induce a long acting antibacterial effect that does not readily rinse away. The value of such an antibacterial was well demonstrated in the recent, controversial withdrawal of hexachlorophene from use in nurseries. A far more widespread use of these materials is in the highly advertised deodorant and antiseptic soaps.

There are two general types. One is the bisphenol, of which by far the best known and most widely used is hexachlorophene. The value of this product is well established. Hexachlorophene has a fairly good record as far as photosensitivity is concerned although this author has seen heavy pigmentation and thickening of the skin in a nurse who used it routinely for face care over a period of years.

The second major group, the brominated salicylanilides, are much more active as photosensitizers. There is a fairly long list of cosmetics which use brominated salicylanilides. The list includes